WILLIAMSTOWN TOWNSHIP APPLICATION FOR WETLAND BUFFER USE PERMIT

NOTICE TO APPLICANT: This application must be accompanied by the data requirements specified in the Wetland Protection Ordinance (and elsewhere on this form); including 2 sets fully dimensioned folded site plans, 1 set of electronic plans in pdf format, and the required review fees. A decision on the proposed Wetland Buffer Area Use Permit shall be rendered within 45 days of receipt of a completed application for any activity not proposed in conjunction with an activity requiring site plan, special land use, plat approval or determines that the proposed activity within the wetland buffer area is of sufficient intensity that the wetland maybe be negatively impacted, in which case a full review and approval of the proposed Wetland Buffer Area Use Permit by the Planning Commission and Township Board shall be required. If the application is forwarded to the Planning Commission and Township Board, a decision shall be rendered within 90 days of receipt of a completed application. Regular meetings of the Planning Commission are held on the third Wednesday of each odd numbered month, at 7:30 p.m., unless otherwise stated and posted, and regular meetings of the Township Board are held on the second Wednesday of the month, at 6:00 p.m., unless otherwise stated and posted. All meetings are held at the Williamstown Township Hall, 4990 North Zimmer Road, Williamston MI 48895. Phone number: (517) 655-3193. An application may be retired from the Planning Commission agenda, after notification of the applicant, if it has not appeared on at least one of three consecutive Planning Commission agendas.

TO BE COMPLETED BY APPLICANT:

I (We), the undersigned, do hereby reinformation to assist the review:	espectfully request	wetland but	ffer use	review	and	provide	the	following
NAME OF APPLICANT								
MAILING ADDRESS								
TELEPHONE	CELL PHO	NE						
FAX:	_ <mark>E-MAIL</mark> :							
INTEREST IN PROPERTY (if not owner)								
PROPERTY OWNERS (if different than	applicant):							
NAME(S)								
MAILING ADDRESS								
TELEPHONE								

LOCATION OF PRO	OPERTY:		
STREET ADDRESS	S:		
SIDWELL (PROPE	RTY ID) #:		
PROPERTY DESCI	RIPTION		
PROPERTY SIZE:	ACRE	S, OR	SQUARE FEET
NOTE: If property (i.e., "acreage parce	is part of a recorded plat, provide lot el"), provide metes and bounds descri	number and subdivision name. iption. Attach separate sheets if	If not part of a recorded plat necessary.
PLAN PREPARER	INFORMATION:		
Name	Address	Telephone	Primary Responsibility
SUFFICIENT GROU SUBSEQUENT TO S <u>APPLICANT'S ENI</u> By the signature(s) of	attached hereto, I (we) certify that the	E PLAN OR TO REVOKE ANY P	ERMITS GRANTED application and accompanying
	the best of my (our) knowledge, true and the Township or its consultant to conduct a		ation shall constitute permission
Signature of applicant	c(s)	Date	
Signature of owner(s)		Date	
IF JOINTLY OWNED, SI	GNATURES OF <u>ALL</u> OWNERS (HUSBAND, \	WIFE, ETC.) ARE REQUIRED.	

Updated: 8.5.15

PLEASE SUBMIT THE FOLLOWING ALONG WITH THIS APPLICATION TO:

WILLIAMSTOWN TOWNSHIP 4990 ZIMMER RD WILLIAMSTON MI 48895

- a. **A completed application** on the form supplied by the MDEQ only if wetland impacts are included, (copies of which may be obtained from the Township)
- b. **Wetland delineation** prepared by a qualified wetland expert, which shall include, at minimum, the following information: the wetland and wetland buffer. The boundaries of the wetland and buffer shall be flagged in the field to permit review by the Township Wetland Consultant
- c. A plan indicating the location and limits of proposed activities in the Wetland Buffer Area.
 - a. Site Location Map
 - b. Site size and property boundaries
 - c. Description of the activities within the buffer
 - d. Plan views and cross sections with excavation/fill quantities, etc.
 - e. Other specifics that may be associated with proposed activities (e.g. show all regulated activities within the buffer.
- d. Review comments and /or approval from County and State agencies, if needed.

CONSULTANT RECOMMENDATION	DATE
SUPERVISOR/DESIGNEE RECOMMENDATION	DATE
REFERRED TO PLANNING COMMISSION	DATE
PLANNING COMMISSION RECOMMENDATION	DATE
TOWNSHIP BOARD ACTION	DATE
APPLICANT NOTIFIED OF DECISION	DATE
AUTHORIZED SIGNATURE	DATE

Updated: 8.5.15